BEST AVAILABLE COPY

	PATENT A	APPLICATIO Effect	RD		pplication /		ocket Num	iber					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			104					RATE	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			104 minus 20=		* 2	84		X\$ 9=	756	OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		*	13 X42		X42=	546	OR	X84=		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				+140=		8	1	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	1672	OR	TOTAL		
CLAIMS AS AMENDED - PART II								IOIAL	1012	OR	OTHER	THAN	
(Column 1) (Column 2) (Column 2)								SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING - AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MQ.	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=		X42=		OR	X84=		
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=			+280=		
,								TOTAL		OR	TOTAL		
(Column 1) (Column 2) (Column 3)								DIT. FEE	L	OR	ADDIT. FEE		
NDMENT B		(Column 1) CLAIMS		HIGH	EST	(Column 3)	Г		ADDI-	1 1		ADDI-	
		REMAINING AFTER AMENDMENT		NUM PREVI PAID		PRESENT , EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AMEN	Independent	*	Minus	***		=		X42		OR	X(* =		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							440	 		000		
						L	+140= TOTAL		OR	+280= TOTAL			
									L	OR	ADDIT. FEE		
		(Column 3)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	:	HIGH NUM PREVI PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=			X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=		
** If the entry in column 1 is less than the entry in column 2, write 0 in column 3. ** If the "High st Number Pr viously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Pr viously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE		
		nb r Previously Pa					r found	t in the ap	propriate bo	x in co	lumn 1.		